

## SECTION VI - CONTINUED INTERSTATE CLAIMS

1. Continued Interstate Claims

a. Agent State Responsibilities. At the time of an initial claim, the Agent State should give the claimant two interstate continued claim forms, or a lesser number as requested by the Liable State, and pre-addressed envelopes. Where possible, the claimstaker should enter the name of the Liable State and the week ending dates on the forms. The claimant should be provided verbal/written completion and filing instructions and instructed to complete and mail the form on the Sunday or Monday following the date shown.

The claimstaker should also advise the claimant that the Liable State will provide additional information and claim forms which may be different from those being issued. The claimant should be instructed to use the forms and follow the instructions provided by the Liable State if they are received before weeks are claimed. The claimant should also be told that if a certification form for the same week(s) is received from the Liable State after the week has been claimed, do not claim the week twice.

If the Liable State has implemented electronic weeks claimed certifications, the claimant should be advised that he/she will receive filing instructions from the Liable State.

The claimant should be advised to follow the Liable State's weeks claimed filing instructions and to contact the Liable State directly if a problem arises. However, it is the Agent State's duty to provide assistance to any claimant who requests it.

b. Liable State Responsibilities.

(1) Initial Information Packet. The Liable State should provide an informational packet to each interstate claimant upon receiving an initial claim. The Liable State decides on the content of the packet. However, at a minimum, it should contain information on filing weeks claimed; appealing a determination with which they disagree; any policy or legal considerations which the claimant should know; benefit information; any special requirements of the Liable State; and a telephone contact number.

(2) Continued Claims Forms. The Liable State should establish a method to systematically provide continued claim forms to the claimant which ensures that the claimant has the necessary forms whether the claim is in payment, pending, or

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disqualification status. Such system should initiate forms to the claimant upon the receipt of the initial claim.

(3) Claimant Information and Assistance. The Liable State should provide experienced and knowledgeable staff members to handle claimant inquiries in a prompt and businesslike manner. Claimants who make telephone inquiries should not be kept holding on the line while prolonged searches for records are made, nor should claimants' calls be transferred more than once before reaching the appropriate staff member who can answer the questions being raised. When a claimant cannot be immediately helped, a message should be taken and the claimant should be told when the call will be returned (i.e., this afternoon, tomorrow morning).

(4) Monitoring Work Search. The Liable State is responsible for monitoring the claimant's continuing eligibility. If the Liable State's continued claim form does not provide space for claimants to list their work search, the Liable State should devise a scheme to fulfill this need.

(5) Change of Address. When, during the claims series, the claimant reports an address change, the Liable State should advise the claimant to report the change to the Agent State local office/claim center if the address change has not been reported on an initial claim or Form I-16.

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2. Continued Interstate Claim, Form IB-2, (8 1/2" X 11")

a. Face of Form

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b. Back of Form

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c. Purpose. Two or fewer Form IB-2s will be issued to each claimant by the Agent State at the time of an initial claim, in accordance with instructions from the Liable State. The claimant will be instructed to use the form(s) until the Liable State provides the claimant with certification forms and instructions. This form will be used anytime a claimant requests a certification form from the Agent State.

d. Preparation of Form IB-2. The Form IB-2 is designed for self-filing by the claimant. However, the claimstaker should complete the claimant's social security account number, the Liable State's name, program type, and the week ending date for the claimant. The claimant should be issued an IB-7 and advised to follow the form completion instructions when completing the Form IB-2.

When a Form IB-2 is being filed through the Agent State, all entries must be legible, preferably printed, and the form should be completed as follows:

(1) Claimant's Name. The claimant's name should be printed exactly as it appears on the claim records. If the claimant's name has changed, the new name should be entered and a written explanation should accompany the claim form.

(2) Social Security Number. Self-explanatory.

(3) Mailing Address. The claimant's local mailing address should be entered.

(4) Liable State. Self-explanatory.

(5) Regular, E, Other. This section is used to indicate whether the claimant is claiming under regular, extended, additional, or other special programs.

(6) Telephone Number. Self-explanatory.

(7) Have You Moved Since Last Claim Filed? This question is asked to prompt a change of the claimant's address of record and to indicate a need for the claimant to report to the Agent State local office for availability and Job Service purposes.

When the claimant answers "yes" to this question, it is not sufficient for the Liable State to just change the claimant's address of record, the claimant should be informed to report to

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his/her Agent State local office to update Agent State records.

(8) Claim for Week Ending. The date of the Saturday at the end of the week claimed is entered in this space.

(9) Employment During the Week Claimed. The claimant must answer this question and provide appropriate information for every week claimed to enable the Liable State to determine continuing eligibility.

(10) Reasons for Separation. When the claimant indicates employment during the week claimed, this question must be answered. When the reason is other than "lack of work" or "still working", the claimstaker must complete an IB-11S when the claim is filed through the local office. Advise claimant to provide details of the separation in the "Remarks" section or a letter if claim is mailed under by-pass procedures.

(11 and 12) Deductible Income. These questions must be answered for each week claimed. If either question is answered "yes", the amount received must be entered.

(13) Availability, Job Refusal, Attending School, Self-Employment, and Duplicate Claims. Each of these questions must be answered for the week claimed. If a "yes" or "no" answer appears in any asterisked box, further factfinding or explanation must accompany the claim.

(14) Local Office Identifying Information. Self-explanatory.

(15) For Use of Liable Office. Self-explanatory.

(16) Work Search. The claimant must list in this section independent efforts made to find work.

(17) If no work search efforts are shown in item 16, an explanation must be provided in this section.

(18) Returned to Work. If the claimant returns to work during a week claimed or prior to completing the claim form, this information must be provided concerning the employment.

(19) Remarks. This section can be used by the claimant or the claimstaker to provide additional information.

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(20) Certification. This certification must be signed by the claimant for each week claimed.

(21) Eligibility Review Interview. If this form is used by the Agent State local office when the claimant has reported in person, this question must be answered.

(22) Claimstaker's Remarks. If the claimstaker has additional information that is pertinent to the claim, it should be provided to the Liable State in this section.

(23) Claimstaker's Signature. When this form is used by the Agent State local office to accept a week claimed certification, the claimstaker should sign and date the form in this section.

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3. Interstate Claim Information Sheet and IB-2 Completion Instructions, Form IB-7 (8 1/2 X 11" - White)
  - a. Face of Form



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b. Reverse of Form

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c. Purpose. The Form IB-7 is given to interstate claimants who file an interstate initial claim to inform them of the general procedures for filing interstate claims and to provide completion instructions for the Form IB-2. It is given to all claimants together with the Form IB-2s when new, additional, or reopened claims are filed. All claimants should be instructed to keep this form for reference, as it contains the Liable State's address and telephone number.

The Liable State will send the claimant more procedures and specific instructions when it receives the initial claim.

d. Completion Instructions. The Agent State must enter the name, address, and telephone number of the Liable State in the space provided on page 1. The Agent State may wish to pre-print forms with the identity of the most frequently used Liable States.